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17157 U.S. PTO

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PTO/SB/05 (12/97)  
Approved for use through 9/30/00. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	3028.2.1	Total Pages	33
First Inventor : Timothy M. Kilgore			
Title: A METHOD OF PROVIDING HEALTH CARE SERVICES			
Express Mail Label No.	ER731165817US		

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form  
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant Claims Small Entity Status
3. ☒ Specification (Total Pages) 26  
(Preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Application
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) (Total Pages) 5
5. Oath or Declaration (Total Pages) 2
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation /divisional with Box 17 completed)  
[Note Box 5 below]
    - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents  
Mail Stop Patent Application  
P.O. Box 1450  
Alexandria, VA 22313-1450

7. ☐ CD-Rom or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ Paper
  - c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2) (B) (i).  
Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Express Mail Certificate

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

## 19. CORRESPONDENCE ADDRESS

- ☐ Customer Number or Bar Code Label 36491  
☐ Or Correspondence address below

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Name: Michael W. Starkweather

Registration No.  
(Attorney/Agent): 34,441Signature: Michael W. StarkweatherDate: 03/01/2004

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <p style="margin: 10px 0;"><i>Note: Effective October 1, 2001. Patent fees are subject to annual revision.</i></p>		<b>Complete If Known</b>		
		Application Number	Not yet assigned	
		Filing Date	March 1, 2004	
		First Named Inventor	Timothy M. Kilgore	
		Group Art Unit		
		Examiner Name		
TOTAL AMOUNT OF PAYMENT		\$ 425	Attorney Docket Number	3028.2.1

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																		
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account No.: _____</p> <p>Deposit Account Name: _____</p> <p>Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee In 37 CFR at the Mailing of the Notice of Allowance <input type="checkbox"/></p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>	<h3>3. ADDITIONAL FEES</h3> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2010</td><td>2255</td><td>1005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive -unavoidably</td><td></td></tr> <tr><td>1453</td><td>1330</td><td>2453</td><td>665</td><td>Petition to revive - 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SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name		Michael W. Starkweather		Reg. Number	34,441
Signature				Date	Mar 1, 2004
				Deposit Account User ID	

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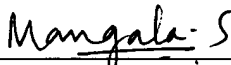
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Date of Deposit: March 1, 2004

I hereby certify that this patent application in the name of Timothy M. Kilgore, David L. Haas for A METHOD OF PROVIDING HEALTH CARE SERVICES, together with the drawings, a Declaration, Power of Attorney, and Petition, an Assignment and Recordation Form Cover Sheet, Information Disclosure Statement, PTO Form 1449, and Check No. 1235 for \$ 425 are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Respectfully submitted,

  
\_\_\_\_\_  
Mangala Shekar  
Asst To Michael W. Starkweather

Date: March 1, 2004

Michael W. Starkweather  
8 East Broadway, Suite 600  
Salt Lake City, Utah 84111  
Telephone: 801/994-4646